

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

SECRET
RECEIVED
CLERK OF THE SENATE
Official Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

Bob Casey for Senate Inc

ADDRESS (number and street) ▼

PO Box 58746

Check if different than previously reported. (ACC)

Philadelphia

PA

19102

2. FEC IDENTIFICATION NUMBER ▼

C C00431056

3. IS THIS REPORT

X

NEW (N)

OR

AMENDED (A)

ZIP CODE ▲

STATE ▼ DISTRICT

PA

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

X January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

MM / DD / YYYY

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

MM / DD / YYYY

in the State of

5. Covering Period

MM / DD / YYYY
11 27 2012

through

MM / DD / YYYY
12 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Charles Lyons

Signature of Treasurer

Charles Lyons

Date

MM / DD / YYYY
01 31 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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